

ed to the integument immediately over the joint; by others, the integument corresponding to the blood-supply of the joint, a broad band above and below the joint answering very well.

Usually, however, cotton dusted with potassa nitrat. and covered by oiled muslin is applied to the joints, affording marked relief. An opiate is given at night:

R. Sol. morph. sulph. (Mag.), ℥_{lxxx};
Tr. belladonnæ, ℥_{xvj};
Aq. fœniculi, ℥_j. M.

Sig. ℥_j p. r. n.

If a friction-murmur develop in the pericardium or pleura, an attempt is made to arrest the inflammatory process by vesication, collodion cum cantharide being used for this purpose. If, however, this fails, hot fomentations are applied to the affected side. Spongio-piline wrung out in hot water and covered with oil silk is generally used. A young girl developed acute pleuritis, left side, and pericarditis, in the course of an attack of rheumatic fever. Spongio-piline applications to the side, changed every two hours, relieved wonderfully the intense lancinating pain she experienced, and appeared to hasten the absorption of the effused fluid. Alkalies were not used in this case. Tr. scõnit. rad., ℥_j q. 1 h., was given, modifying the amount of febrile disturbance. The patient rapidly convalesced.

In subacute rheumatism, iron, quinine, and cod-liver oil are given internally, with nutritious diet. Occasional revulsives, as tincture of iodine, are applied, as in the acute disease.

In chronic rheumatism, in addition to tonics, a large number of cases have been treated by painting the joint with hydrarg. et morph. oleat's, most of them receiving considerable benefit from its use, especially in the alleviation of pain.

SURGERY.

FORCIBLE RECTIFICATION OF IN-KNEE.

M. Delore read a paper on this subject before the French Association for the Advancement of Science. In-knee is a common result of rickets and scrofula, which prevail so extensively at Lyons. M. Delore states it is principally due to exaggeration of the natural curvature of the femur and tibia, accompanied by great depression of the internal tuberosity. In 350 cases he has rectified it by forcible pressure under chloroform; continued until the periosteum is detached and epiphysis is separated as announced by a cracking sound. The position is maintained by a starch bandage, and in a month the cure is complete. No accident has occurred, but the operation should not be performed after the fifteenth year or on weak subjects.—*Med Times and Gaz.*, September 6, 1873.

FOREIGN BODY PERFORATING THE BLADDER.

A case is reported (*L'Union Medicale*, Aug. 21,) which is instructive in its results. A man, aged twenty-four, had introduced into his urethra a lead-pencil, which presently slipped from his hand, and the efforts made to extract pushed it

into the bladder. Two days afterwards he was admitted to the Hôpital St. Louis, in a state of much anxiety; the belly was painful, and the scrotum, root of the penis, and perineal region tumefied, red and œdematous. The indications called for immediate operation, and M. Péan performed the prerectal operation for lithotomy; the pencil, ten and a half centimètres long and one half centimètre in diameter, was extracted intact. No alleviation of the local or general symptoms followed, and the patient died in a few days with the signs of intense peritonitis. The necropsy showed a small infundibuliform perforation of the fundus of the bladder, implicating the whole thickness of the walls; through this the urine had infiltrated, giving rise to the fatal symptoms. A second gutter-shaped wound was observed in part of the prostatic portion of the urethra. The case illustrates not only the dangers arising from the presence of pointed foreign bodies in this locality, but also the danger that efforts directed in the dark to their extraction may increase the injury which they inflict.

SHORT NOTES.

RETURN OF MENSTRUATION IN A SEPTUAGENARIAN.

Born in 1800, this lady menstruated regularly up to 1849, when this function ceased. In 1868 it again returned, and has now been perfectly normal in appearance and regularity ever since.—*Rivista Clinica di Bologna*, July 25, 1873.—*The Clinic*.

L'QUID NOURISHMENT FOR SICK STOMACH.

An egg, well beaten up, to which add one pint of good milk, one pint of cold water, and salt to make it palatable; let it then be boiled, and when cold any quantity may be taken. If it turns into curd and whey it is useless.—*H. S. Malahan*, in *Dublin Medical Journal*.

THIRD ATTACK OF MEASLES.

I have a young lady about twenty-three years of age, suffering for the third time from an attack of measles! All the characteristic symptoms, such as the eruption, the deeply-congested state of the mucous membranes of the eyes, nose, larynx, and bronchia, are most pronounced.—*Charles Anderson*, in the *London Lancet*.

NATURE IN DELIRIUM TREMENS.

Dr. Van de Warker believes (*New York Medical Journal*, August, 1873) that opiates, stimulants, and narcotics generally do harm in the treatment of delirium tremens, and that the proper plan is to provide for the nutrition of the impoverished brain and nerve-centres, by the free administration of food which can be easily digested and assimilated. Beef-tea, raw eggs, and milk, with attention to the condition of the bowels, have given him very satisfactory results.

ACUTE ANEMIA DUE TO FRIGHT.

An interesting case presented itself at St Bartholomew's Hospital, in the person of a young woman, æt, 20, pallid, bleached, not menstruating, and with the typical aspect of an anæmic female. She stated that ten weeks previously she was in perfect health, had a good colour, and menstruated regularly. At that time a fire had broken out in

a house adjoining that in which she lived, and she had been exceedingly alarmed. Since then her menses had ceased and she had assumed her present appearance. There can be no doubt that anæmia is too frequently regarded and treated as the result of a constant blood-defect—the consequence of a chemically altered circulating fluid. Such cases direct attention to a deeper and more significant pathology for some forms of anæmia,—an altered condition of the nervous system.—*British Medical Journal*, Aug. 23, 1873.

OCCLUSION OF THE EUSTACHIAN TUBE.

Dr. Rudinger, in *Monatshrift der Ohrenheilkunde*, No. 3, 1873, after a series of experiments carried on upon himself, has arrived at the conclusion that the Eustachian tube is habitually closed. When it is accidentally opened through a contraction or cramp of the dilating muscle of the tube, the voice has a peculiar sound for the person who is speaking, and resumes its natural sound only when the tube is again closed.

NEURALGIA OF THE TESTICLES.

In a number of the *Wiener Medicinische Press*, Dr. Lazarus investigates the condition called "painful testicle," "neuralgic testicle," &c., and sets down the following plan of treatment, which he states has been very successful: Sulphate of zinc internally (four grains of the sulphate of zinc in seven ounces of water, a tablespoonful three times daily); and subcutaneous injections behind the scrotum (with the needle syringe) of a solution of ten grains of sulphate of zinc to two and a half to three drachms of water.

CULTIVATION OF IPECACUANHA.

Dr. G. D. Henderson, in his report on the Royal Botanical Gardens, Calcutta, published in the *Calcutta Gazette* of June 25, describes the progress which has been made in the cultivation of ipecacuanha. There are now about seven thousand plants either at Rungbee or Calcutta, and no difficulty appears to exist in propagating the plant artificially. The conditions under which it will flourish in the open air have not been as yet determined. Experiments are, however, being made in this direction. Dr. Henderson has also tried to cultivate the *Eragrostis purga*, which yields the jalap of commerce, but as yet without success.—*Indian Medical Gazette*.

ATROPIA IN CHOLERA.

During a recent outbreak of cholera, Dr. R. Saunders obtained excellent results by the hypodermic injection of one-fiftieth to one-thirtieth of a grain of sulphate of atropia. In some cases the relief afforded was astonishing: the more distressing symptoms—vomiting, purging, and cramps—were ameliorated almost at once; the skin grew warm, the pulse rose, the surface, previously clammy and shrivelled, assumed its natural condition, and in some instances the patient slept soundly for ten or twelve hours, the bowels remaining undisturbed during the entire time. These effects, however, only followed when the atropia was used in sufficient quantities to produce the specific scarlatina rash, dry throat, and dilatation of the pupils.—*The American Practitioner*.